

VA



U.S. Department
of Veterans Affairs

Brief Cognitive Behavioral Therapy for Chronic Pain: Patient Guidebook

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Brief Cognitive Behavioral Therapy for Chronic Pain

Provider Name: _____

Provider Phone: _____

<i>Appointment</i>	Date	Time
<i>1</i>		
<i>2</i>		
<i>3</i>		
<i>4</i>		
<i>5</i>		
<i>6</i>		

Important Note: If at any time you are experiencing a crisis or thoughts of suicide, please contact the Veterans Crisis Line by calling 1-800-273-8255 (Press 1), in addition to reaching out to your VA provider or hospital.

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Welcome to Brief Cognitive Behavioral Therapy for Chronic Pain

We're excited that you've chosen the **Brief Cognitive Behavioral Therapy for Chronic Pain** program. This guidebook is designed to be used with the treatment provided by your Behavioral Health Provider. Your provider may give you a printed copy of this guidebook if you're meeting face-to-face or may provide you with an electronic version if you're meeting virtually (including by telephone or via video telehealth). This guidebook includes all of the educational handouts and worksheets you will need to complete the modules. We've also included some additional guidance about what you can do before and after you complete each module with the provider so that you can get the most out of Brief Cognitive Behavioral Therapy for Chronic Pain. First, let's get started by answering a few common questions about the program:

What exactly is Brief Cognitive Behavioral Therapy for Chronic Pain?

This brief treatment program is designed to help you manage chronic pain. You can think of it as a 6-part class that will improve your understanding about chronic pain and teach new skills to manage pain. Sometimes the skills covered in the treatment modules are not entirely new to you, in which case your provider will help you strengthen the skills you already have (like a coach helping an athlete). Other times, your provider will work with you to overcome hurdles so that these skills work best for you.

By now, you know firsthand just how difficult it can be to live with chronic pain. This program works by helping you play an active role in making your situation better. Although Brief Cognitive Behavioral Therapy for Chronic Pain will not eliminate all of your pain, it can help you to cope with the challenges of living with chronic pain.

The “big picture” goals of this program are to help you:

Feel more
confident in your
ability to manage
pain

Do more of the
things you enjoy
doing

Use skills that
help you find
balance and
avoid flare-ups

Rethink unhelpful
thoughts and be less
fearful about pain

Will this program work for me?

Research tells us that, on average, patients report improved functioning after completing Brief Cognitive Behavioral Therapy for Chronic Pain¹. Mostly, patients report being more confident and less restricted by their pain. Your provider will track your progress at each meeting and will work closely with you to get the most out of the program!

What do appointments look like?

Each 30-minute appointment will follow the same format below:

- Introduce the topic of the day
- Check in on your mood and pain
- Review the topic discussed at your previous appointment
- Check in on “at-home practice” from the prior meeting
- Discuss the topic of the day, such as a new pain management strategy
- Come up with home practice to work on between appointments
- Wrap-up

What will we talk about during my appointments?

This program focuses on pain. Because there are only six appointments, and each appointment is only 30 minutes long, it is important to stay focused on pain. Other topics — such as medication, depression, or problems with a loved one — are very important as well but are generally not the focus of these appointments. However, if these topics are the main focus of your concern (versus pain), your provider can help connect you to a different provider or type of treatment.

How should I use this guidebook?

We recommend reading this guidebook before and after each appointment (and anytime you wish between appointments).

This guidebook will tell you:

1. What to expect at your next appointment, so that you can be prepared to dive in.
2. The main topics of each appointment, so that you can review them at any time.
3. What to do after your appointment, so that you can practice your skills at home.

Should I bring the guidebook to my appointments?

We highly recommend it! You will be able to jot notes down in your guidebook if you are using a paper copy. If you are completing Brief Cognitive Behavioral Therapy for Chronic

¹ Beehler, G. P., Murphy, J. L., King, P. R., Dollar, K. M., Kearney, L. K., Haslam, A., Wade, M., Goldstein, W. R. (2019). Brief Cognitive Behavioral Therapy for Chronic Pain: Results from a clinical demonstration project in Primary Care Behavioral Health. *Clinical Journal of Pain*, 35, 809-817.

Pain virtually, you can also have it displayed on your screen during your session if you would prefer not to use a paper copy. Plan to bring the guidebook to your session so that you can review your home practice with your provider. Practice review is a key aspect of this program!

Tracking Your Progress

As part of this program, you will complete a brief survey at the beginning of each appointment. Your answers will help you and your provider to track your progress and to see if any treatment changes are needed.

The survey will ask you questions about three separate aspects of your pain over the past week:

1. How bad your pain has been
2. How much pain has interfered with your ability to enjoy life
3. How much pain has interfered with your ability to do things that you usually do

PEG

Instructions: Please read each question carefully and then circle a number on the scale under that question to indicate how that specific question applies to you.

1. What number best describes your pain on average in the past week?

0 1 2 3 4 5 6 7 8 9 10

No Pain Pain as bad as you can imagine

2. What number best describes how, during the past week, pain has interfered with your enjoyment of life?

0 1 2 3 4 5 6 7 8 9 10

Does not interfere Completely interferes

3. What number best describes how, during the past week, pain has interfered with your general activity?

0 1 2 3 4 5 6 7 8 9 10

Does not interfere Completely interferes

Reference: Krebs, E.E., Lorenz, K.A., Blair, M.J., et al. (2009). Development and initial validation of the PEG, a three-item scale assessing pain intensity and interference. *Journal of General Internal Medicine*, 24: 733-738.

Your provider may also ask you to complete additional surveys not listed here.

Don't be alarmed if your answers to these questions don't change as quickly as you'd like them to. It takes time to develop the skills discussed in this program. Strive for progress, not perfection! Be sure to talk to your provider if you are concerned that this program is not meeting your needs. We want to make sure that this program is helpful for you and talking to your provider is the best way to ensure that you are both on the same page about your goals and progress.

Module 1. Pain Education and Setting Goals

What to Expect at This Appointment

You can think of this appointment as an **“intro” course on pain!** You will learn about 1) why chronic pain is different than acute (or short-lived) pain, 2) the many **factors that impact pain** and why they are important, and 3) how to avoid getting stuck in the chronic pain cycle. You also will identify **pain-related goals** that you’d like to work on while in this program. These goals are important because they will help your provider learn about what matters most to you!

Main Ideas Discussed in Module 1

1

Chronic pain is different than other pain

4

Setting the right kind of goals can help you break the pain cycle

2

Thoughts, emotions, and behaviors can make pain worse or more manageable

5

It is important to practice the skills you learn in this program outside of your appointments

3

Chronic pain can lead to a cycle of sadness and inactivity which makes pain even worse in the long run

To-Do Before for Your Next Appointment

☐ **Read and Complete: Factors that Impact Pain**

What factors impact your pain the most? Everyone is different, so consider what hurts/helps you the most.

☐ **Read: The Chronic Pain Cycle**

Learn how to recognize and avoid the chronic pain cycle!

☐ **Read: Brief Cognitive Behavioral Therapy for Chronic Pain**

This handout summarizes the main ideas behind this treatment program.

☐ **Complete: SMART Goal Setting**

Learn about what makes a goal a SMART one. You’ll want to write down at least one short-term and one long-term SMART goal so that we can tailor this program to you.

Real People with Pain: Can You Relate?

Sherry is a 59-year-old nurse who hurt her back five years ago while working. Since then, pain has made it harder for Sherry to do her job and other things she enjoys, like walking her dog. Sherry's doctor told her that she might benefit from **Brief Cognitive-Behavioral Therapy for Chronic Pain**. Sherry had never considered working on her pain with a Behavioral Health Provider and was confused why her doctor made this suggestion.

"Are you saying the pain is all in my head?" Sherry asked.

"Not at all. Your pain is very real. The goal of this program is to help you cope better with pain, not to talk yourself out of feeling it."

Sherry was still skeptical, but agreed to give the program a try, in part because it was designed to be short. Sherry noticed that her first appointment moved quickly but really stayed focused on her experience with pain. It felt like a personalized training course, which she really liked. Sherry was surprised by how much she learned in this session. For example, she learned how chronic pain should be treated by a variety of approaches, especially ones that focus on helpful behaviors and new habits. Sherry also liked that the provider gave her the patient guidebook to refer to during the session — and to take home with her — because the handouts help her to stay focused. Sherry was intrigued by the Chronic Pain Cycle handout, which described her situation "to a T." Sherry had definitely stopped being as active because of pain and was feeling more distressed as a result.

Before Sherry knew it, the session was wrapping up — this was a pleasant surprise considering what she thought "therapy" might be like. Sherry couldn't believe it, but she was actually motivated to finish the at-home practice about her treatment goals she was given at the end of the session. Sherry had always been a goal-driven person, which had made her a great nurse throughout the years, but she had never considered spelling out her goals related to pain management. She looked forward to taking the first steps to meeting her goals with the help of her Brief Cognitive Behavioral Therapy for Chronic Pain provider.



Factors That Impact Pain

Chronic pain is impacted by many factors. The interactions among these factors (shown below) influence how you feel overall:

1. Biological factors

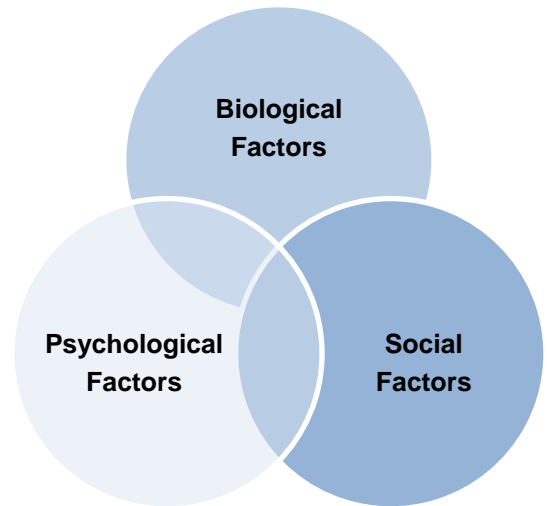
- Pain, medical issues

2. Psychological factors

- Emotions, attention, thoughts

3. Social factors

- Relationships, job, hobbies



The good news is that while some factors may increase your pain, others may decrease it. *You can decide how to manage many of these factors.*

**Below are just a few examples of factors
that may impact your pain:**

Factors That May Increase Pain	Factors That May Decrease Pain
Physical Factors	
Illness or new injuries	Seeking medical treatments
Muscle tension	Using relaxation techniques
Thoughts	
Expecting the worst	Balancing positive and negative thinking
Focusing on pain	Distracting yourself
Emotions	
Depression or anger	Appropriate emotional expression, seeking social support, engaging in pleasant activities



Factors That May Increase Pain	Factors That May Decrease Pain
Stress/worry/anxiety	Exercising safely and using relaxation techniques
Behaviors	
Too much (<i>or too little</i>) activity	Pacing yourself
Lack of involvement in hobbies	Doing more of what you enjoy
Social Interactions	
Social isolation	Spending time with family and/or friends
Lack of (<i>or too much</i>) support from others	Volunteering/staying involved with community



What are some things that have helped make your experience with pain better?

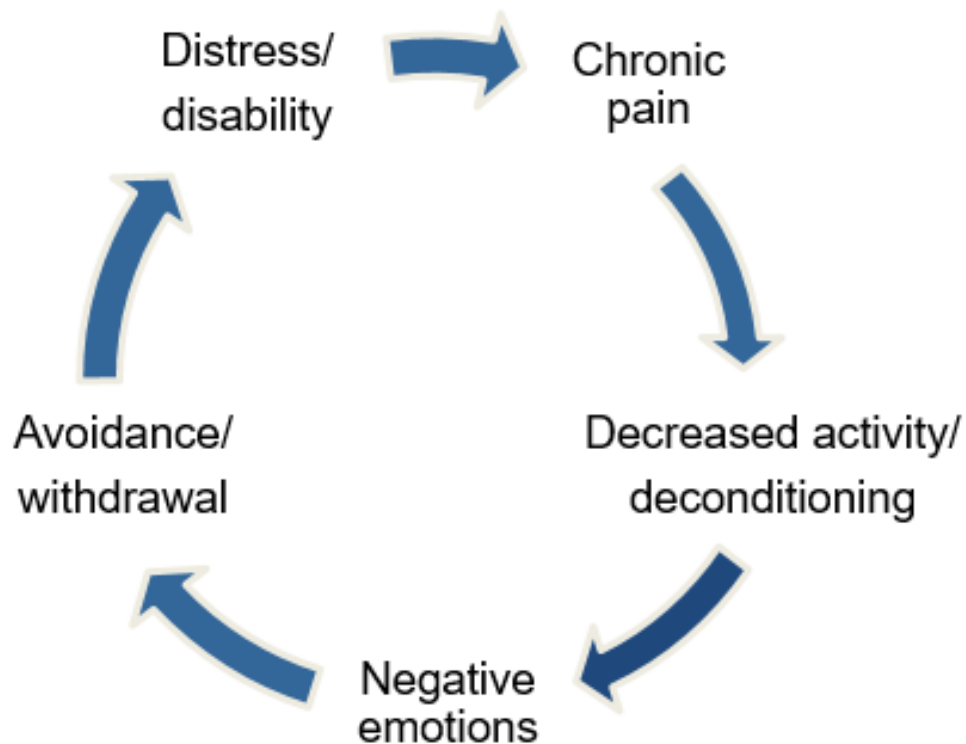
1. _____
2. _____
3. _____

What are some things that have made your experience with pain worse?

1. _____
2. _____
3. _____

The Chronic Pain Cycle

Many people with chronic pain fear that movement will increase pain or cause physical damage/injury. This fear often leads a decrease in activities which then leads to physical deconditioning (e.g., less strength and stamina, weight gain). Dealing with constant pain may also lead to negative thoughts and emotions such as frustration and depression. **All of these factors contribute to increased avoidance of people and activities.**



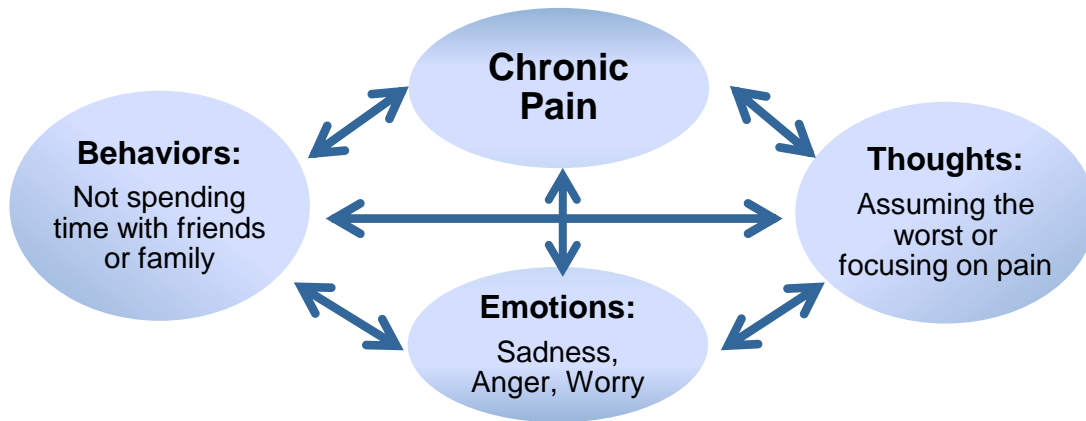
THE COSTS OF INACTIVITY

While this cycle is understandable for those with chronic pain, *it is not helpful!* In fact, getting stuck in this cycle actually makes things worse over time:

- More pain
- Poor physical fitness
- Less time with family and friends
- Depressed mood or increased irritability
- Lower self-esteem
- Increased strain on relationships
- Decreased quality of life

Brief Cognitive Behavioral Therapy for Chronic Pain

This treatment focuses on how you think, feel, and behave in relation to your pain. As shown in the picture below, these things are all related:



For example, chronic pain could lead to:

- Thoughts like, “I’m never going to feel better”
- Avoiding activities, even ones that you enjoy
- Feeling sad, angry, or worried

The goal of this treatment is to help you address these common reactions to chronic pain so that you feel more confident in your ability to do things you enjoy and live a full and meaningful life despite having pain.

Treatment Goals

- Learn new strategies to cope with pain
- Improve your physical and emotional functioning
- Decrease how often you experience flare-ups as well as how much they impact you
- Reduce the intensity of your pain

SMART Goal Setting

A SMART goal uses the following guidelines:

S	Specific	Should identify a specific action or event that will take place. In other words, “What specifically do I want to do?”
M	Measurable	Should be able to track progress. In other words, “How will I know I have met my goal?”
A	Attainable	Should be attainable and realistic. In other words, “Is this really something that I can do?”
R	Relevant	Should be personally meaningful and really matter. In other words, “How important is this to me?”
T	Time-bound	Should state the time period for accomplishing the goal. In other words, “By when do I want to achieve this goal?”

Adapted from Doran, 1981

SMART Goal Versus Non-SMART Goal

Non-SMART Goal: *I want to get into physical shape.*

SMART Goal: *I want to be more active by walking twice a week for 30 minutes for the next three months so that I can keep up with my grandchildren when I see them during the holidays.*

Non-SMART Goal: *I want to be more social.*

SMART Goal: *I want to go watch a movie and eat dinner with my friends once a week for the next three months so I spend less time alone while I manage my chronic pain.*

Short-term goals can be accomplished over the course of this treatment (about 3 months). For each goal, consider if it fits the SMART criteria listed above. These should be personally meaningful goals that motivate you to complete the program and improve your pain management skills. Once goals are identified, track them on a weekly basis to ensure that progress is occurring. If it is not, make adjustments as needed.

Short-Term Goals

In the space below, write down SMART goals you would like to achieve in the next three months.

1. _____

2. _____

3. _____

Accomplishing short-term goals keeps us motivated to achieve long-term goals. Long-term goals are those for the next 6–12 months (or even longer). They will not be accomplished fully during this program, but you can continue to work towards them using the skills you have developed.

Long-Term Goals

In the space below, write down SMART goals you would like to achieve in the next 6 –12 months.

1. _____

2. _____

3. _____

Module 2. Activities and Pacing

What to Expect at This Appointment

The goal of this appointment is to help you find a **balance** between doing too much and doing too little, both of which can make pain worse. First you will think of **enjoyable (or meaningful) activities** that you've stopped doing as much as you'd like to, and then you will **learn pacing strategies** that can help you to engage in these activities more safely.

Main Ideas Discussed in Module 2

1

Chronic pain hurts, but it does not mean that we are harming ourselves

4

Pacing allows us to balance activity with rest, each of which is important

2

We lose strength and flexibility when we stop being active, which can make pain worse in the long run

5

It's easier to pace ourselves when we plan to pace ahead of time

3

Pleasant activities can improve our mood and distract us from pain

To-Do Before for Your Next Appointment

- ☐ **Review: The Chronic Pain Cycle**
This worksheet will remind you of why it's important to stay active despite pain.
- ☐ **Complete: Pleasant Activities List**
Check off activities on the list that you would like to try and add your own activities to the list to personalize it!
- ☐ **Complete: Pleasant Activities Schedule**
Schedule at least two pleasant activities for the next week — remember, planning ahead helps us stay active.
- ☐ **Read: Pacing Activities**
This sheet shows how overactivity often leads to negative consequences and how pacing can keep us from “crashing and burning.”
- ☐ **Complete: Activity Pacing Schedule**
Use this worksheet to plan your pacing goals for the week and then use it to record your progress.

Real People with Pain: Can You Relate?

Chris is a 33-year-old Veteran who started his own landscaping company in 2018. Chris enjoys the work he does, but he doesn't enjoy the effect it has on his left knee, which he injured during a field training exercise in the military.

As Chris puts it, *"I love my job, but hate my knee."*

While Chris didn't think of himself as a "therapy guy," he was fed up with the pain and curious to see what **Brief Cognitive Behavioral Therapy for Chronic Pain** was all about.

At first, Chris wasn't sold on the idea of pacing. *"I get why pacing can help, but I don't think it's for me. When I start a job, I don't stop until it's finished — I think I'm just wired that way."*

The more Chris talked with his provider, the more he realized that he actually used pacing quite a bit in the military — for example, during physical fitness tests involving long-distance running. In Chris's words: *"It 'clicked' for me when I realized that I didn't constantly sprint during long runs in the military, so why was I doing that with my landscaping jobs?"*

Chris made several changes based on what he learned in the second module.

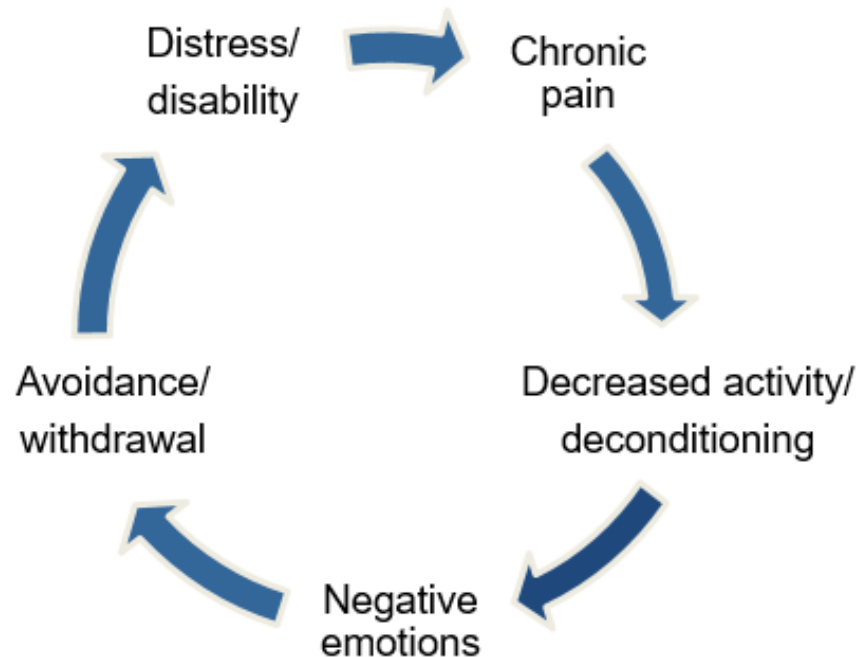
- First, he started to schedule 10-minute breaks for every 30-minutes he worked, regardless of how good he was feeling. Chris had a habit of "pushing through" jobs when he was feeling good, even though he knew it would eventually catch up with him.
- Second, Chris started checking his phone for work-related calls and texts during breaks, which he often put off until the end of the day, sometimes at the expense of his business.
- Third, Chris started switching to a different kind of task than what he had been doing before the break. For example, if he had been kneeling to work with mulch before the break, he would stand to trim bushes after the break.

By planning ahead in these ways, Chris was able to put less stress on his knee while still staying productive.



The Chronic Pain Cycle

Many people with chronic pain fear that movement will increase pain or cause physical damage/injury. This fear often leads a decrease in activities which then leads to physical deconditioning (e.g., less strength and stamina, weight gain). Dealing with constant pain may also lead to negative thoughts and emotions such as frustration and depression. **All of these factors contribute to increased avoidance of people and activities.**



THE COSTS OF INACTIVITY

While this cycle is understandable for those with chronic pain, *it is not helpful!* In fact, getting stuck in this cycle actually makes things worse over time:

- More pain
- Poor physical fitness
- Less time with family and friends
- Depressed mood or increased irritability
- Lower self-esteem
- Increased strain on relationships
- Decreased quality of life

Pleasant Activities List

Try different activities to distract yourself from pain and improve your mood. Which of the following are activities that have helped you feel better in the past or are some new things that you would like to try? Check off any that apply!

- ☐ Go fishing
- ☐ Text, email, or call friends/family
- ☐ Get your hair cut or nails done
- ☐ Take a walk, exercise, or stretch
- ☐ Do yard work or gardening
- ☐ Read a book or magazine
- ☐ Watch or participate in sports
- ☐ Go to the park
- ☐ Organize
- ☐ Woodwork
- ☐ Surf the internet
- ☐ Look into classes you'd like to take
- ☐ Plan a trip
- ☐ Draw or paint
- ☐ Walk your dog/play with your pet
- ☐ Listen to music
- ☐ Watch a movie or your favorite show
- ☐ Take or edit pictures

- ☐ Repair or fix something
- ☐ Start or finish a project
- ☐ Go to the pool or beach
- ☐ Plan something nice for others
- ☐ Go for a drive
- ☐ Decorate or re-arrange your home
- ☐ Knit or sew
- ☐ Sing or play an instrument
- ☐ Do hobbies (e.g., building models)
- ☐ Visit with family or friends
- ☐ Enjoy a hot bath or shower
- ☐ Chat with your neighbor
- ☐ Write or journal
- ☐ Play games or do puzzles
- ☐ Go shopping
- ☐ Meditate or pray
- ☐ Other activities/ideas?

Adapted with permission from K.M. Phillips, Ph.D.

Pleasant Activities Schedule

List some activities that you enjoy doing:

1. _____

2. _____

3. _____

4. _____

Choose at least two pleasant activities that can be scheduled over the course of the week and write them on your personalized pleasant activity schedule on the next page.

Place an “X” to schedule your pleasant activity (example shown below).

Activity	Sun	Mon	Tues	Wed	Thu	Fri	Sat
Gardening		X		X		X	

Circle the “X” when completed (example shown below).

Activity	Sun	Mon	Tues	Wed	Thu	Fri	Sat
Gardening		X		X		X	

Pleasant Activities Schedule, continued

Now **schedule your own pleasant activities**. The example from above is shown in the shaded area.

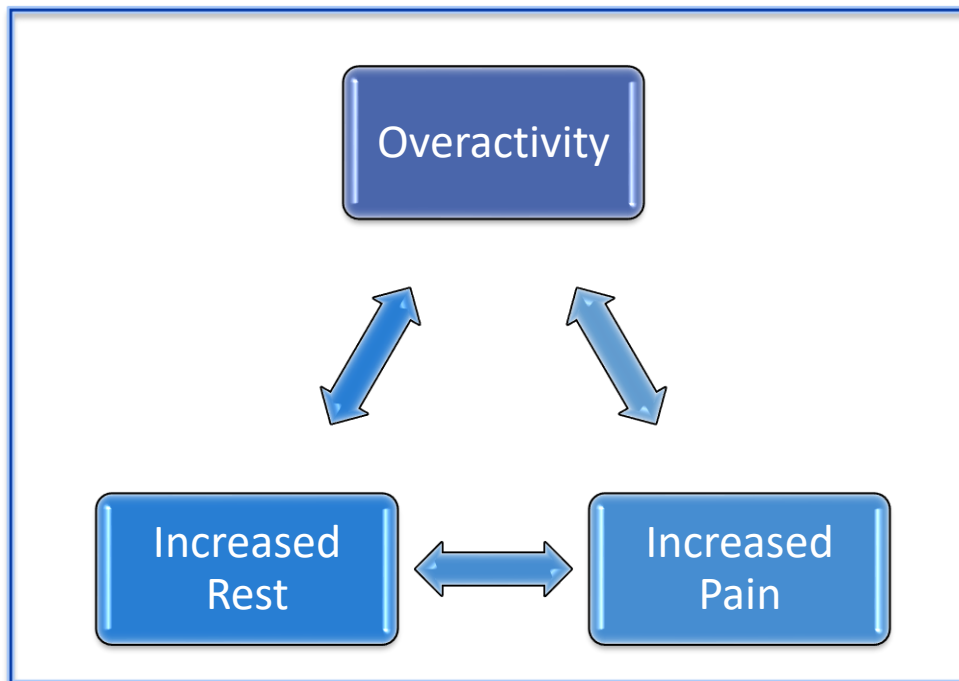
Activity	Sun	Mon	Tues	Wed	Thu	Fri	Sat
Gardening		X		X		X	

Remember to not overdo it when engaging in activities! This is an important concept that will be discussed in more detail later.

Pacing Activities

Some people with chronic pain may be fearful about harming themselves and avoid activity altogether. Others are prone to pushing through pain on a “good pain day” to accomplish a strenuous task and will not stop until it is complete. The next day, they wake up with a pain flare-up and must rest for a day or more to recover!

The example above describes the **Overactivity Cycle**. If the Overactivity Cycle happens on a recurring basis, it can lead to negative consequences such as increased stress and anxiety, decreased efficiency, lowered self-esteem, and avoidance of any activity.



Engaging in a moderate, safe level of activity on a regular basis helps you avoid this cycle of being underactive or overactive. Using the skill of pacing, where time is the guide for activity engagement, can be a helpful strategy. Pacing is about balancing activities, planning ahead, and working “smarter not harder.”

How to Pace

1. Estimate how long you can safely do one of your regular activities (e.g., yardwork, dishes) without causing a severe pain flare-up.
2. Set the length of time you’ve chosen minus one minute as your "active" goal time for the activity.
3. Approximate the amount of "resting" time you will need in order to safely resume activity or continue your day.

Pacing Activities, continued

Remember

You might discover that the amount of time you can stay active may need adjusting after you practice pacing for the first time. It is important to stick with the time-based pacing goals, even if you are having a “good” or “bad” pain day. Sticking to the pacing schedule prevents you from getting stuck in the overactivity or inactivity cycle.

Spread out activities during the week and be reasonable with the schedule so you can succeed.

Use the table on the next page to record how you pace activities this week. Use the sample below as your guide where each period of activity and rest equals one cycle.

Examples

In the first example, **one cycle of pacing** was completed on Day 1 (*working* for 10 minutes and *resting* for 15 minutes). **Two cycles of pacing** were completed on Day 2 (*working* for 10 minutes and *resting* for 15 minutes).

Activity 1: Gardening

	Active Goal (Minutes)	Rest Goal (Minutes)	Number of Cycles
Day 1	10	15	1
Day 2	10	15	2

Activity 2: Washing dishes

	Active Goal (Minutes)	Rest Goal (Minutes)	Number of Cycles
Day 1	15	10	1
Day 2	15	10	2

Pacing Activities, continued

Schedule Your Own Activity 1: _____

	Active Goal (Minutes)	Rest Goal (Minutes)	Number of Cycles
<i>Day 1</i>			
<i>Day 2</i>			
<i>Day 3</i>			
<i>Day 4</i>			
<i>Day 5</i>			
<i>Day 6</i>			
<i>Day 7</i>			

Schedule Your Own Activity 2: _____

	Active Goal (Minutes)	Rest Goal (Minutes)	Number of Cycles
<i>Day 1</i>			
<i>Day 2</i>			
<i>Day 3</i>			
<i>Day 4</i>			
<i>Day 5</i>			
<i>Day 6</i>			
<i>Day 7</i>			

Module 3. Relaxation Training

What to Expect at This Appointment

At this appointment you will learn how **relaxation exercises** can help manage chronic pain. You will also practice two relaxation techniques: **deep breathing and progressive muscle relaxation**. We will teach you these techniques during your appointment so that you know the basics, but you will need to practice them on your own in order to master them!

Main Ideas Discussed in Module 3

1

Chronic pain creates a fight-or-flight response which puts additional stress on the body and increases pain

4

We can relax our bodies by breathing deeply and by tensing then relaxing specific muscle groups

2

Relaxation training can slow down the fight-or-flight response and even reduce pain

5

Relaxation training can be used safely every day to reduce stress and chronic pain

3

Relaxation training is *not* the same thing as resting — it is a skill that requires practice

To-Do Before for Your Next Appointment

☐ **Read: Relaxation: Benefits & Tips**

Look for tips that will help you to practice relaxation between appointments.

☐ **Practice: Deep Breathing**

This exercise is the foundation for all relaxation skills, so it's important to practice it until it becomes second nature.

☐ **Practice: Progressive Muscle Relaxation**

Remember to *gently* tense your muscles — this exercise should not hurt.

☐ **Complete: Relaxation Practice Record**

Use this worksheet to keep track of your relaxation practice. Try to practice relaxation at least once a day and be sure to rate your level of tension before and after each time you practice.

Real People with Pain: Can You Relate?

Frank is a 58-year-old mail carrier who has been dealing with neck and shoulder pain for as long as he can remember. As Frank told his provider: *“The more I hurt, the more everything feels like a hassle. I used to enjoy my job, but it just stresses me out now — I’m getting tense just thinking about it!”*

Frank was interested to learn that pain triggers the body’s fight-or-flight response, which is helpful at the right time (for example, in dangerous situations), but stressful when “left on” for a long time.

As Frank’s provider put it: *“Chronic pain is like a smoke detector that stays on well after the fire’s been put out. Who wouldn’t feel stressed out if all they heard was an alarm going off?”*

This idea made a lot of sense to Frank. But what was he supposed to do now? Frank’s provider suggested that they focus on re-teaching Frank’s body to relax: *“People often hold certain areas of their bodies tightly to brace for pain. From what you’ve told me, it sounds like you tense your neck and shoulders because you’re either responding to pain or anticipating it. This type of reaction is perfectly natural, but it creates all sorts of wear and tear on the body, which increases pain and stress levels even more.”*

With this in mind, Frank’s provider suggested that he take an active approach to managing stress by using relaxation techniques such as Deep Breathing and Progressive Muscle Relaxation. With practice, these techniques can retrain the body to respond in more adaptive ways to pain — or, in Frank’s words, *“to ignore that dang smoke alarm!”*



Relaxation: Benefits & Tips

The goal of relaxation is to reduce the effects of stress on your health. Since chronic pain produces chronic stress on the body, it is important to regularly practice relaxation techniques that can help your mind and body recover. Relaxation is more than resting or enjoying a hobby – it involves using specific strategies to reduce tension.

Benefits of Relaxation

Relaxation is important for good health. When you are relaxed, your muscles are loose, your heart rate is normal, and your breathing is slow and deep. Learning how to relax can help especially when you feel pain. Relaxation prompts your body to release chemicals that reduce pain and produce a sense of well-being.

Relaxation won't cure pain or other chronic symptoms, but skills that relax the body and the mind may help decrease muscle tension, prevent muscle spasms, and relieve the stress that can aggravate pain and other symptoms.

Taking time to relax and refuel your energy provides benefits such as:

- Improved mood
- Increased energy and productivity
- Improved concentration and focus
- Improved sense of control over stress and daily demands
- Improved nighttime sleep
- Increased self-confidence
- Greater ability to handle problems
- Decreased anxiety and other negative emotions such as anger and frustration
- Increased blood flow to muscles and reduced muscle tension
- Lower blood pressure, breathing rate, and heart rate
- Decreased pain, such as headaches and back pain

Relaxation Practice Tips

Relaxation is a skill that requires practice. You may not feel the benefits immediately, so don't give up! Remain patient and motivated and you'll reduce the negative impacts of stress. And remember: If relaxation feels foreign or unnatural, that likely means you are a person who needs it most!

Establish a routine

1. Set aside time to practice relaxation at least once or twice a day. Pairing relaxation with a regular activity may help you remember to practice (for example, take ten relaxed breaths before bed or whenever you sit down to eat).
2. Practice at various times throughout the day until relaxation becomes natural and you can use it readily when you feel stressed. You may want to leave "reminders" for yourself to relax (for example, sticky notes on the bathroom mirror, kitchen cabinets, or car dashboard with the words "relax" or "breathe").

Be comfortable

1. Practice on a comfortable chair, sofa, mat, or bed. Dim the lights.
2. Loosen tight clothing and remove shoes, belt, glasses or contact lenses, if you like.

Concentrate

1. Eliminate disruptions. Turn off the TV, radio, or telephone.
2. Practice in a quiet, calm environment.
3. Close your eyes to reduce distractions and improve concentration. If you prefer, keep your eyes open and focus on one spot.
4. Move your body as little as possible, changing positions only for comfort. Don't worry if you have some distracting thoughts—it happens to everyone. Just notice that your thoughts have wandered and then gently, without judgment, return your attention to your breath.

Relax

1. Begin and end relaxation practices with relaxed breathing techniques.
2. Use a relaxation CD if it helps. Gradually, learn to relax without a CD so that you can use relaxation techniques anywhere.

3. Let relaxation proceed naturally and spread throughout your body. Do not try to resist.

Be patient

1. Give yourself time to learn relaxation skills. Practice is required for these techniques to become automatic.
2. Try not to become upset if you have trouble concentrating. A wandering mind is normal and expected. Keep bringing your attention back to your breath.
3. Don't worry about how well you are practicing.
4. After a few weeks, select a word, such as "calm," "relax," "peace," or "patience" that you can say during relaxation practices. Eventually, simply saying that word may help you relax.

Incorporate relaxation into daily life

1. Over time, move relaxation practices from planned, quiet settings to "real life." The goal is to be able to calm yourself when necessary, no matter where you are.
2. Use relaxation whenever you notice yourself feeling stressed or anxious, such as waiting in line, at a doctor's appointment, or during a difficult meeting.

Deep Breathing Training

1. Start by becoming aware of your breathing. Place one hand on your abdomen at the waistline just over the bellybutton and the other hand on the center of your chest. Without trying to change anything, simply notice how you are breathing. Notice *where* you are breathing from, whether your shoulders are rising and falling, whether your chest is rising and falling, or perhaps whether your belly is rising and falling. Notice how your hands move as you breathe. Pay attention to whether one hand is moving more than the other. **(PAUSE 5 seconds)**
2. Now notice the rate of your breathing. Pay attention to whether you are breathing rapidly or slowly. Your breathing may be deep or shallow. **(PAUSE 5 seconds)**
3. Now as you slowly inhale, imagine the air flowing deeper into your belly. Feel your belly fill with air as your lower hand rises. Pause briefly at the top of your breath, and then follow your breath out as you completely exhale. Slowly take a breath in...two, three, four, and slowly exhale...two, three, four. Let any tension melt away as you relax more deeply with each breath. **(PAUSE 5 seconds)**
4. Notice the feeling of cool fresh air entering through your nose, through your nasal passage, to the back of your throat, and descends deep into your lungs. Notice what happens as you are inhaling... and then exhaling... Feel the temperature of each breath cool as you inhale, and warm as you exhale. Count your breaths as you breathe in and out. **(PAUSE 10 seconds)**
5. Notice your breath becoming smooth and slow. Feel your belly and ribcage expand outward with each breath. Feel yourself become more relaxed with each exhale. Allow your shoulders to become heavier with each exhale. **(PAUSE 15 seconds)**
6. Continue breathing slowly and gently. **(PAUSE 15 seconds)**
7. Again, slowly take a breath in...two, three, four, and slowly exhale...two, three, four. Feel yourself become more and more relaxed with each exhale. **(PAUSE 15 seconds)**
8. Continue breathing slowly and gently. **(PAUSE 15 seconds)**
9. Now, as I count from five to one, feel yourself become more alert. Five...bringing your attention to this room. Four...feeling calm and relaxed. Three...start to wiggle your fingers and toes. Two...slowly start to move and stretch your muscles. One...open your eyes, feeling refreshed.

Progressive Muscle Relaxation

Noticing the difference between tensed and relaxed muscles is important. This skill reduces anxiety by promoting relaxation and helps you to recognize when your body is tense. In order to master this skill, you will be asked to tense certain muscle groups as hard as you can without hurting yourself. After 5 seconds of holding the tension, you will be instructed to relax your muscles and release the tension.

1. Tense your **lower arms** by making fists with your hands and pulling your fists up by bending your wrists. Focus on the tension. **(PAUSE 5 seconds)**
2. Now release the tension. Let your hands and lower arms relax onto the chair or bed beside you. Feel the release from tension as you relax the muscles fully. **(PAUSE 10 seconds)**
3. Create tension in the **upper arms** by pulling the arms back and in toward your sides. Feel the tension in the back of the arms and radiating towards the shoulders and into the back. Focus on the tension and hold. **(PAUSE 5 seconds)**
4. Now, release the arms and let them relax – almost feeling heavy at your sides. Notice the difference between the previous tension and the new feelings of relaxation. Your arms might feel heavy, warm, and relaxed. **(PAUSE 10 seconds)**
5. Now bring your attention to your **lower legs**. Build tension by extending your legs in front of you and pointing your toes toward your upper body. Feel the tension as it spreads through your feet, ankles, shins, and calves. Hold this tension. **(PAUSE 5 seconds)**
6. Release all of the tension in your lower legs. Let your legs relax onto the chair or bed. Feel the difference in these muscles as they relax. Feel the release from tension, the sense of comfort, the heaviness of relaxation. **(PAUSE 10 seconds)**

Continue working through the various muscle groups, alternating between tension and release. Remember to feel the tightness when holding the tension, and to notice the difference between tension and relaxation upon release.

7. **Upper legs and buttocks:** Tense by pressing knees together and lifting legs slightly off the bed or chair. **(PAUSE 5 seconds)**. Release tension by letting legs sink into chair or bed. **(PAUSE 10 seconds)**

8. **Abdomen:** Tense by pulling your abdomen in towards your spine. **(PAUSE 5 seconds)**. Release tension by relaxing your abdomen to its normal position. **(PAUSE 10 seconds)**
9. **Chest:** Build tension in your chest by taking in a deep breath and holding it. **(PAUSE 3-5 seconds)**. Release tension by slowly letting the air escape, and resume normal breathing, letting air flow in and out smoothly and easily. **(PAUSE 10 seconds)**
10. **Neck and shoulders:** Create tension by pulling your shoulder blades back and up towards your ears. **(PAUSE 5 seconds)**. Release tension by letting your shoulders drop down, sinking further and further until they are completely relaxed. **(PAUSE 10 seconds)**
11. **Mouth, jaw, and throat:** Create tension by clenching your teeth and turning the corners of your mouth back into a forced smile. **(PAUSE 5 seconds)**. Release the tension by letting your jaw drop down and relaxing the muscles around your throat and jaw. **(PAUSE 10 seconds)**
12. **Eyes and lower forehead.** Build tension by squeezing your eyes tightly shut and pulling your eyebrows down. **(PAUSE 5 seconds)**. Now release all the tension in your eyes and lower forehead. **(PAUSE 10 seconds)**
13. **Upper forehead and scalp:** Build tension by raising your eyebrows as high as possible. Feel the wrinkling and pulling across the forehead and top of the head. **(PAUSE 5 seconds)**. Now release all the tension in your forehead, letting the eyebrows gently rest down. **(PAUSE 10 seconds)**

Now, you will work towards a state of relaxation.

14. Your whole body is feeling relaxed and calm. Scan your body for any last bits of tension and if you notice any, let that tension go. Enjoy the feelings of relaxation. **(PAUSE 5 seconds)**
15. As I count from one to five, feel yourself become more and more relaxed. One...let all tension leave your body. Two...sink further and further into relaxation. Three...feel more and more relaxed. Four...feel very relaxed. Five...deeply relaxed. **(PAUSE 30 seconds)**

16. As you spend a few minutes in this relaxed state, think about your breathing. Feel the cool air as you breathe in and the warm air as you breathe out. Your breathing is smooth and regular. Every time you breathe out, think to yourself "relax, relax, relax." You are feeling comfortable and relaxed. **(PAUSE 1-3 seconds)**
17. Now, as I count from five to one, feel yourself become more alert. Five...bringing your attention to this room. Four...feeling calm and relaxed. Three...start to wiggle your fingers and toes. Two...slowly start to move and stretch your muscles. One...open your eyes, feeling refreshed and rejuvenated.

Relaxation Practice Record

Use the record below to chart your relaxation practice over time.

- **Before** you begin your practice, use the scale below to rate your level of tension.
- **After** you complete the practice, use the same scale again to rate your level of tension.
- Noting any differences will help you figure out if the exercises are helping you relax.

But remember, these exercises take practice and it might take several tries before you start to see results!

0	1	2	3	4	5	6	7	8	9	10
Extremely Tense			Slightly Tense		Slightly Relaxed		Very Relaxed		Totally Relaxed	

Date	How long did you practice? (minutes)	Level of tension before practice (0-10)	Level of tension after practice (0-10)	What did I notice?

Module 4. Cognitive Coping (Part 1)

What to Expect at This Appointment

This appointment focuses on the relationship between our thoughts and how we experience pain. You will learn how **negative thoughts can worsen our experience of pain** while more balanced thoughts can improve our experience of pain. You will also begin to **identify the negative thoughts you experience** so that you can replace them with more balanced or helpful thoughts.

Big Ideas Discussed in Module 4

1

Our thoughts do not *cause* pain, but they can influence how we cope with pain

3

With practice, we can become more aware of ANTs and understand their impact on our pain

2

Negative thoughts about pain usually happen quickly and seem out of our control, which is why we call them *automatic* negative thoughts (ANTs)

4

When we are aware of ANTs we can find more helpful ways of thinking about our pain

To-Do Before for Your Next Appointment

- ☐ **Review: Brief Cognitive Behavioral Therapy for Chronic Pain**
This will remind you of how thoughts can affect the way we cope with pain.
- ☐ **Read: Pain Thoughts**
Read over the list of common pain thoughts — do any of these patterns sound familiar?
- ☐ **Complete: Catching ANTs**
Identify at least one ANT each day. Write down the day/situation in which you had the thought and circle whether the thought was helpful or harmful. Don't worry about challenging ANTs just yet — you'll work on that at your next appointment.

Real People with Pain: Can You Relate?

Paulette is a 65-year-old woman who was diagnosed with arthritis in her hip a few years ago, which has become more bothersome in the last several months. Paulette prides herself on being a positive person, but she's found herself getting more and more frustrated with her health the more that pain interferes with her daily routines. As she told her provider: *"There are many days when I just seem to wake up grumpy and stay grumpy. It doesn't make sense because they're not always bad pain days, either!"*

Paulette's provider reminded her that our mood can certainly be influenced by pain but that it can also be influenced by the way we think about pain. Paulette was skeptical of this idea and wondered whether her provider was suggesting that the pain was "in her head."

"Not at all!" said her provider. *"What I'm saying is that certain thoughts can turn up the volume on pain, while other thoughts can turn down the volume. What kind of thoughts have you had during flare-ups?"*

Paulette struggled to identify specific thoughts because, as she said, *"I'm not used to thinking about thinking!"* Paulette's provider assured her that this is a common struggle because many pain thoughts happen quickly and are difficult to notice. The more Paulette talked with her provider, the better she was able to identify a few "automatic" thoughts she has about pain, which included: *"This pain is only going to get worse"* and *"My hip is just useless now."*

Paulette was able to see how these kinds of thoughts could have a harmful effect on her mood, but she was still unsure of why she felt grouchy on "good" pain days. *"It just doesn't make sense to me! Take yesterday for example: I was able to go on a walk with my granddaughter and even though my hip felt pretty good, my mood was still lousy afterward."*

"What were you thinking during and after the walk?" her provider asked.

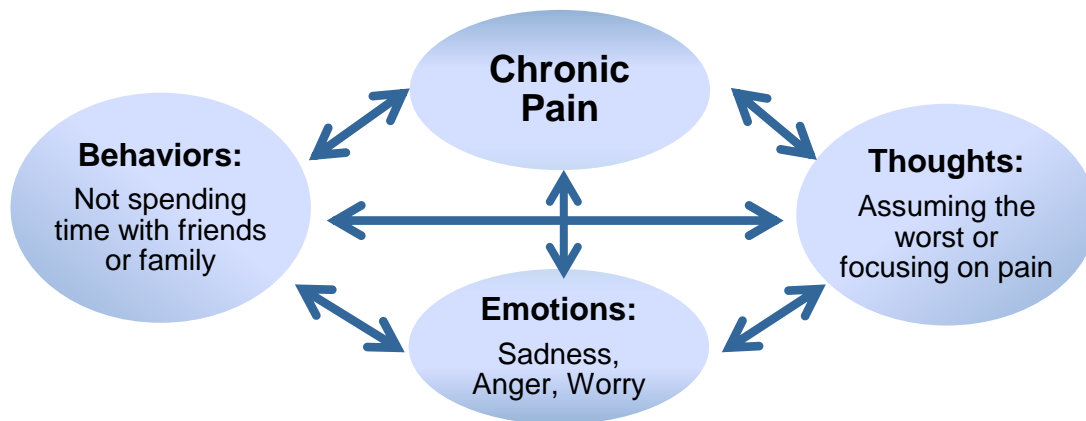
Paulette was surprised to learn that she was having negative thoughts about pain even when she wasn't in pain, including *"Don't get used to this,"* and *"It's only a matter of time until my pain acts up again."*

"Wow, I really have focused a lot on pain, haven't I?" remarked Paulette. Paulette's provider reassured her that many people experience these very same thoughts, and that the first step toward having more helpful thoughts is to simply notice the unhelpful ones!



Brief Cognitive Behavioral Therapy for Chronic Pain

This treatment focuses on how you think, feel, and behave in relation to your pain. As shown in the picture below, these things are all related:



For example, chronic pain could lead to:

- Thoughts like, “I’m never going to feel better”
- Avoiding activities, even ones that you enjoy
- Feeling sad, angry, or worried

The goal of this treatment is to help you address these common reactions to chronic pain so that you feel more confident in your ability to do things you enjoy and live a full and meaningful life despite having pain.

Treatment Goals

- Learn new strategies to cope with pain
- Improve your physical and emotional functioning
- Decrease how often you experience flare-ups as well as how much they impact you
- Reduce the intensity of your pain

PAIN THOUGHTS:

Identifying and Replacing Thoughts That Are Not Helpful

Thinking about how much pain you are in does not help you cope with the pain. As pain increases, thoughts may become more negative; as thoughts become more negative, pain often increases further. Negative thoughts can lead to:

- **Worsening mood**
- **Avoiding activities**
- **Isolating/avoiding others**

Although pain thoughts can be automatic, with practice you can become more aware when you have them. Then you can replace unhelpful thoughts with ones that are helpful. Here are some examples of unhelpful pain thoughts and some coping statements that you can use to replace them:

Common Pain Thoughts

Types of Unhelpful Thoughts	Examples of Unhelpful Thoughts	Examples of Helpful Thoughts
Catastrophizing Believing something is the worst it could possibly be.	<i>When my pain is bad, I can't do anything.</i>	<i>Even when my pain is bad, there are still some things I can do.</i>
Should Statements Thinking in terms of how things should, must, or ought to be.	<i>My doctor should be able to cure my pain.</i>	<i>There is no cure for chronic pain, but I can use skills to cope with my pain.</i>
All or None Thinking Seeing things as "either or" or "right or wrong" instead of in terms of degrees.	<i>I can only be happy if I am pain free.</i>	<i>Even if I am in pain, I can still be happy. There is always something that I can do to have a better quality of life.</i>

Types of Unhelpful Thoughts	Examples of Unhelpful Thoughts	Examples of Helpful Thoughts
Overgeneralization Viewing one or two bad events as an endless pattern of defeat.	<i>I tried doing exercises for my back pain before and it didn't help. So, it isn't going to help now.</i>	<i>Although physical therapy didn't help much before, maybe this time it will help. I might as well try.</i>
Jumping to Conclusions Drawing negative conclusions of events that are not based on fact.	<i>When I move my back hurts, so it must be bad for me to move.</i>	<i>Hurt does not equal harm.</i>
Emotional Reasoning Believing how you feel reflects how things really are.	<i>I feel useless, so I am useless.</i>	<i>Even though I can't do all the things I used to do, it doesn't mean I can't do anything.</i>
Disqualifying the Positive Focusing on only the bad and discounting the good.	<i>So what if I am doing more, I am still in pain.</i>	<i>Doing more is important for me to live the life I want to live.</i>

Used with permission from KM. Phillips, Ph.D.

CATCHING ANTs: How to Catch, Check, & Challenge Automatic Negative Thoughts

When we feel upset or angry, most often we also have negative thoughts. These thoughts may happen automatically and increase your pain and negative mood. **You can feel better physically and emotionally by “catching” ANTs when they occur, noticing how they make you feel, and challenging them with more balanced thoughts. Using the chart below, record *at least one* ANT each day. Evaluate the thought and generate a new helpful one.**

Day/Situation	Catch It! Identify ANT	Check It! Effect on your pain/mood	Challenge It! Positive/balanced coping statement
Tuesday/Cleaning garage and pain flares	<i>This pain is killing me. I can't do anything anymore.</i>	Helpful or Unhelpful	<i>I am hurting right now because I overdid it, but I know that I will feel better soon. Then I will pace myself to get the job done.</i>
		Helpful or Unhelpful	
		Helpful or Unhelpful	
		Helpful or Unhelpful	
		Helpful or Unhelpful	
		Helpful or Unhelpful	
		Helpful or Unhelpful	

Adapted with permission from S. Palyo, Ph.D. & J. McQuaid, Ph.D.

Module 5. Cognitive Coping (Part 2)

What to Expect at This Appointment

This appointment will continue to focus on the relationship between our thoughts and how we experience pain. You will review how to **identify unhelpful thoughts** and go over new strategies for checking and challenging them. You will also learn about **positive coping statements** which are “go-to” phrases you can use in difficult situations, such as during a pain flare.

Main Ideas Discussed in Module 5

1

Being aware of unhelpful thoughts is the first step toward challenging them with more helpful thoughts

3

Often the most helpful thoughts balance the positive with the negative — for example, “This pain is awful, but I can get through it”

2

Helpful thoughts are not necessarily the opposite of unhelpful thoughts

4

It’s good to have a few coping statements “in your back pocket” for situations in which it’s difficult to focus, like when the pain is especially bad

To-Do Before for Your Next Appointment

- ☐ **Review: Brief Cognitive Behavioral Therapy for Chronic Pain**
Refer back to this handout to remind yourself why we’re focusing on thoughts.
- ☐ **Review: Pain Thoughts**
Remember that you have to notice ANTs before you can challenge them — reviewing this handout can help you notice ANTs more effectively!
- ☐ **Complete: Catching ANTs**
Identify at least one ANT each day. Write down the day/situation in which you had the thought, circle whether the thought was helpful or harmful, *and* think of a more balanced coping statement that could challenge the ANT.
- ☐ **Review and Complete: Coping Statements**
Pick some coping statements that may be helpful for you and add your own statements to the list — remember, these are *your* coping statements, so be creative!

Real People with Pain: Can You Relate?

(Continued from Module 4)

Paulette came to her fifth session of Brief Cognitive Behavioral Therapy for Chronic Pain eager to talk about all of the ANTs she “caught” between sessions. As she told her provider: *“Now I see why you called them ‘automatic’! I had no idea I was having so many thoughts about pain until I started looking for them.”* What’s more, Paulette noticed that her pain thoughts often involved one of two things: believing that something is the “end of the world” (catastrophizing) or focusing on only the bad parts of a situation while minimizing the good parts (disqualifying the positive).

Using the unhelpful thoughts that Paulette had “caught,” her provider then gave her tips on how to challenge these thoughts. In his words: *“The goal of challenging unhelpful thoughts is not to pretend that everything is actually great — lying to yourself isn’t a good strategy! Rather, the goal is to come up with more accurate and balanced thoughts.”*

With this as her goal, Paulette was able to practice how she might challenge catastrophizing thoughts. For example, her unhelpful thought was: *“I can’t do anything when my arthritis flares up”*. She then identified an alternate thought that acknowledged the impact of the pain but included her helpful coping strategies: *“I can’t do some things when my arthritis flares up, but I can still do something if I pace myself.”*

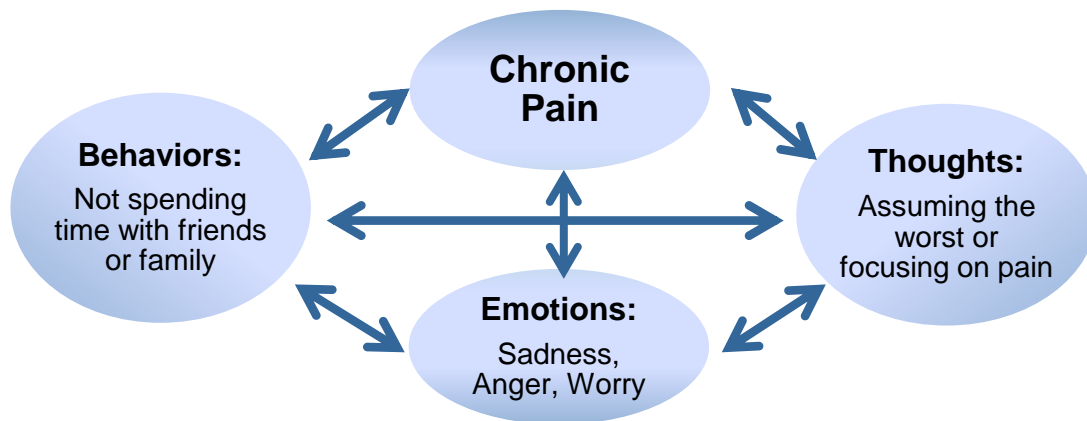
Paulette’s provider also suggested that she come up with a few coping statements that could help her to remain calm during stressful situations. In her provider’s words: *“Sometimes difficult situations sneak up on us and don’t give us much time to unpack our negative thoughts. It’s good to have a few go-to phrases in your back pocket, just to be safe.”*

Paula liked this idea and imagined coping statements to be like a fire extinguisher she could break out in the heat of pain flare-ups. She even knew what phrase she could turn to in stressful situations: *“This too shall pass! — My grandmother used to say that all the time and it’s stuck with me ever since. I guess I haven’t been using it much lately, but I’m going to change that.”*



Brief Cognitive Behavioral Therapy for Chronic Pain

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PAIN THOUGHTS:

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- **Worsening mood**
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		Helpful or Unhelpful	
		Helpful or Unhelpful	
		Helpful or Unhelpful	

Adapted with permission from S. Palyo, Ph.D. & J. McQuaid, Ph.D.

Coping Statements

Here are some statements that can be used to replace unhelpful thoughts. Put an “X” next to the ones that you think may be helpful for you. What things have you told yourself in the past to get through a pain flare or difficult situation? Add your helpful statements to the list.

X	Coping Statement Checklist
	The pain flare passes in a while.
	I can handle this. I just have to make it through this moment.
	I’ve gotten through it before and I can get through it again.
	I don’t have to suffer. I have skills I can use to cope.
	What would I tell a friend who was in pain?
	How can I set a good example for my kids about coping with life’s challenges?
	How would someone I admire cope with this?
	I just have to focus on something else.
	There may be no cure, but I can still live my life.
	I’m going to focus on what I <i>can</i> do, not what I can’t do.

Adapted with permission from K.M. Phillips, Ph.D.

Remember: It’s easy to think of positive statements when you’re feeling okay. But, if you are in a bad mood or having a pain flare, it’s more difficult. Keep a list of these or other helpful statements in a place where you can easily find them when you need them most (e.g., in your wallet, on your refrigerator, in your phone).

Module 6. The Pain Action Plan

What to Expect at This Appointment

This final appointment will include both looking back and looking ahead. More specifically, **you'll look back at the progress you've made in treatment while also looking ahead to new goals** you'd like to explore. You'll also identify pain triggers you're likely to experience in the future and determine the best approaches for coping with them.

Main Ideas Discussed in Module 6

1

It's important to take time to recognize the progress you've made in managing your chronic pain

4

Another way to reduce the impact of triggers is to schedule important activities throughout the week

2

One of the best ways to maintain your progress is to think of specific things in your life that might trigger pain flare-ups

5

Now is also a great time to consider future goals, including long-term goals to stay healthy

3

By identifying triggers now, you can plan to apply the skills you learned in this program to better manage your pain

To-Do List Moving Forward

- ☐ **Complete: Anticipating Obstacles: Plan for Coping**
Write down things in your life that may be triggers for pain flare-ups, as well as ways to cope with them using the skills that you've learned in treatment.
- ☐ **Complete: Weekly Activities Schedule**
Use this schedule to plan your activities for the upcoming week—remember, planning ahead helps us to avoid both inactivity *and* overactivity!
- ☐ **Complete: SMART Goal Setting**
Write down both short- and long-term SMART goals. You've already accomplished a lot in treatment — what are you motivated to accomplish in the future?

Real People with Pain: Can You Relate?

(Continued from Module 2)

As he mentioned at his second session, Chris didn't think of himself as a "therapy guy." However, he grew to like **Brief Cognitive Behavioral Therapy for Chronic Pain** because it felt more like a training program or class (or "Coping Skills 101," as he sometimes referred to it). Chris knew that he'd made progress in treatment, but he didn't really stop to think about this until his final session. In fact, Chris was surprised to see that he'd made improvements in many different areas of his life — for example, his mood was better and he felt like he was leading a more fulfilling life, even though he still had pain.

When asked what skills had been most helpful for him, Chris mentioned the "Three P's," as he called them: planning, pacing, and pausing. *"For the longest time, my plan for pain was to just push through it until I couldn't push any more — that gets old after a while! This program helped me to see that I can outsmart the pain by planning my days ahead of time, pacing myself to get more out of each day, and pausing when the pain gets bad so that I can keep my cool. It sounds simple, but those things have made a big difference for me!"*

Even though this was the end of his time in treatment, Chris knew that this wasn't the end of his work. He knew that he would still have ups and downs and that pain management would require ongoing effort. He was okay with this, though, because he felt like he had a new set of tools and ideas for dealing with pain that could be used well into the future. *"Landscaping has taught me the value of stick-to-itiveness. Even when you've done a great job on a yard, you're not really 'done' because the grass will grow again, and if you expect it to stay perfect, you'll get frustrated in a hurry. I'm learning that pain is kind of like that, too. As much as I'd like to be done with it for good, that's probably not realistic either, so I might as well work on maintaining it as well as I do my yards!"*



Anticipating Obstacles: Plan for Coping

People have many challenging situations in their lives and it is expected that certain obstacles will arise. A difficult day may involve life stressors and increased pain symptoms. **The best time to plan for how you will cope with and manage your pain during one of these days is *now*.**

Below, identify the *specific* things in your life that may be triggers for pain flare-ups, as well as how you may cope with challenges using the skills that you have learned.

Potential Obstacles/Triggers/Stressors: *(Example: Kids fighting, Cold weather)*

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |

Ways to Cope: *(Example: Walking, Deep breathing, Pleasant activity)*

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |

Remember:

BE PREPARED! Consider all the tools you have learned and do not undersell yourself or let automatic negative thoughts (ANTs) sabotage you. Contact friends, family, and VA providers who are there to provide support as needed.

Weekly Activities Schedule

Use the schedule provided to plan your activities for the upcoming week. Be as specific as possible and include items such as doing the dishes as well as the pain management strategies you will employ regularly such as using relaxation techniques.

Be realistic in your planning so that you are able to follow the schedule.

Time	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
7:00 a.m.							
8:00							
9:00							
10:00							
11:00							
12:00 p.m.							
1:00							
2:00							
3:00							
4:00							
5:00							
Evening							

SMART Goal Setting

A SMART goal uses the following guidelines:

S	Specific	Should identify a specific action or event that will take place. In other words, “What specifically do I want to do?”
M	Measurable	Should be able to track progress. In other words, “How will I know I have met my goal?”
A	Attainable	Should be attainable and realistic given resources. In other words, “Is this really something that I can do?”
R	Relevant	Should be personally meaningful and really matter. In other words, “How important is this to me?”
T	Time-bound	Should state the time period for accomplishing the goal. In other words, “By when do I want to achieve this goal?”

Adapted from Doran, 1981

SMART Goal Versus Non-SMART Goal

Non-SMART Goal: *I want to get into physical shape.*

SMART Goal: *I want to be more active by walking twice a week for 30 minutes for the next three months so that I can keep up with my grandchildren when I see them during the holidays.*

Non-SMART Goal: *I want to be more social.*

SMART Goal: *I want to go watch a movie and eat dinner with my friends once a week for the next three months so I spend less time alone while I manage my chronic pain.*

Short-term goals can be accomplished over the near future, or about 3 months from now. For each goal, consider if it fits the SMART criteria listed above. These should be personally meaningful goals that motivate you to complete the program and improve your pain management skills. Once goals are identified, track them on a weekly basis to ensure that progress is occurring. If it is not, make adjustments as needed.

Short-Term Goals

In the space below, write down SMART goals you would like to achieve in the next three months.

1. _____
2. _____
3. _____

Accomplishing short-term goals keeps us motivated to achieve long-term goals. Long-term goals are those for the next 6–12 months (or even longer). They will not be accomplished fully during this program, but you can continue to work towards them using the skills you have developed.

Long-Term Goals

In the space below, write down SMART goals you would like to achieve in the next 6–12 months.

1. _____
2. _____
3. _____